Methods and Apparatus for Facilitating the Provision of Services Lindsay T. Atwood

Application No. 09/933,587 Attorney Docket No. 10000.02



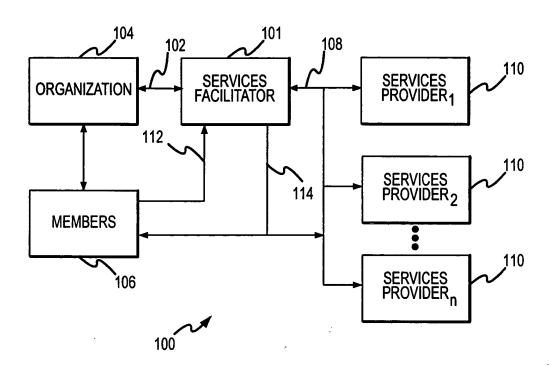


FIG.1

RECEIVED

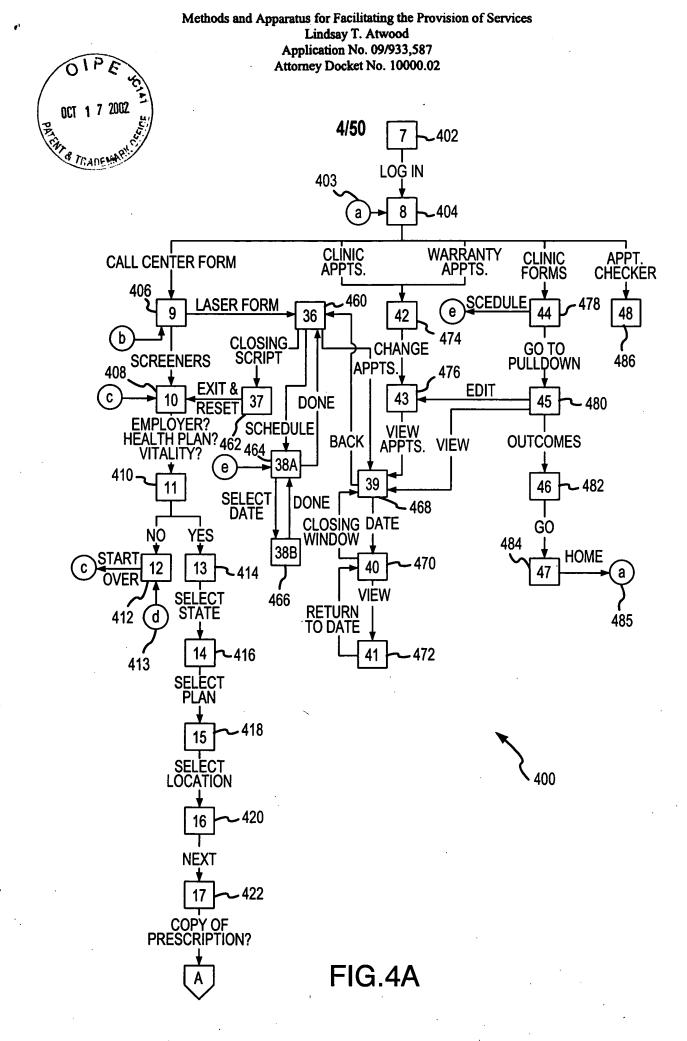
OCT 2 3 2002

GROUP 3600 Methods and Apparatus for Facilitating the Provision of Services Lindsay T. Atwood Application No. 09/933,587 Attorney Docket No. 10000.02 OCT 1 7 2002 2/50 TRANSMI HEALTH SERVICES FACILITATOR MARKETS THE VISION PROGRAM TO ORGANIZATION MEMBERS 202 PRODUCES ALL MARKETING MATERIALS 204 MEMBER CONTACTS HEALTH SERVICES FACILITATOR, AND THE HEALTH SERVICES FACILITATOR--EDUCATES THE MEMBER ON LASER VISION CORRECTION -PRE-SCREENS THE MEMBER (SEE SCREENING QUESTIONS) -SELECTS HEALTH SERVICES PROVIDER BASED ON LOCATION 206 \{-GATHERS MEMBER INFORMATION -COLLECTS DEPOSIT -SCHEDULES THE PRE-OPERATIVE EXAMS FROM SCHEDULES 208 PROVIDED BY THE HEALTH SERVICES PROVIDER HEALTH SERVICES PROVIDER PERFORMS COMPREHENSIVE EXAM 210 IF MEMBER IS A CANDIDATE, THE HEALTH SERVICES PROVIDER ENTERS THE SCHEDULED SURGICAL DATE INTO THE HEALTH SERVICES FACILITATOR'S WEB BASED SYSTEM IF MEMBER IS NOT A CANDIDATE, THE HEALTH SERVICES PROVIDER ENTERS INFORMATION INTO THE HEALTH SERVICES FACILITATOR'S WEB BASED SYSTEM AND A REFUND IS PROVIDED HEALTH SERVICES PROVIDER COLLECTS BALANCE OF PROCEDURE FROM MEMBER PRIOR TO OR ON THE DAY OF THE PROCEDURE 216 HEALTH SERVICES PROVIDER PERFORMS THE PROCEDURE

218

220

HEALTH SERVICES PROVIDER ENTERS POST-OPERATIVE SURGICAL DATA INTO THE HEALTH SERVICES FACILITATOR'S WEB-BASED SYSTEM AND FOLLOWS UP WITH 1 MONTH, 3 MONTH, AND 6 MONTH POST-OPERATIVE SURGICAL DATA - HEALTH SERVICES PROVIDER HONORS THE ENHANCEMENT WARRANTY



Methods and Apparatus for Facilitating the Provision of Services Lindsay T. Atwood Application No. 09/933,587 Attorney Docket No. 10000.02 OCT 1 7 2002 5/50 YES NO 424 .454 33 NEARSIGHTED? FARSIGHTED? CONTACTS **GLASSES** GLASSES STYLE 426 OUT OF. **OUT OF** 27 NO (YES, MILD YES, MODERATE CONTACTS STYLE 456 IN RANGE IŃ RAŅGE 458 428 ΝÖ 430 YĖS NO 432 **YES** NO 25 - 436 - 438 YES NO NEXT 440 26 NO **MALE FEMALE** YES YES NO 29 446 442 448 YES - 450 YES - 452 (REGARDLESS OF SELECTION) FIG.4B

Methods and Apparatus for Facilitating the Provision of Services
Lindsay T. Atwood

Application No. 09/933,587
Attorney Docket No. 10000.02

OT 1 7 2002

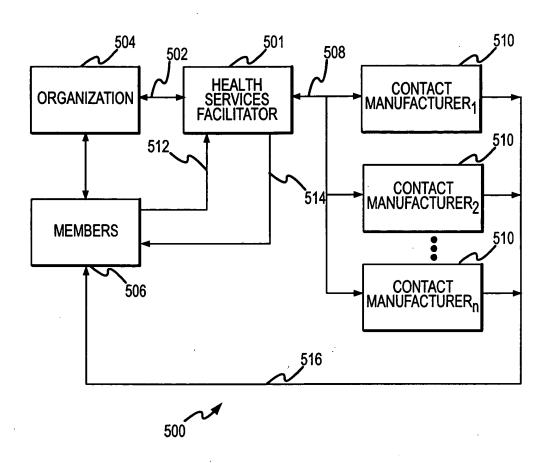


FIG.5

Methods and Apparatus for Facilitating the Provision of Services
Lindsay T. Atwood

Application No. 09/933,587 Attorney Docket No. 10000.02



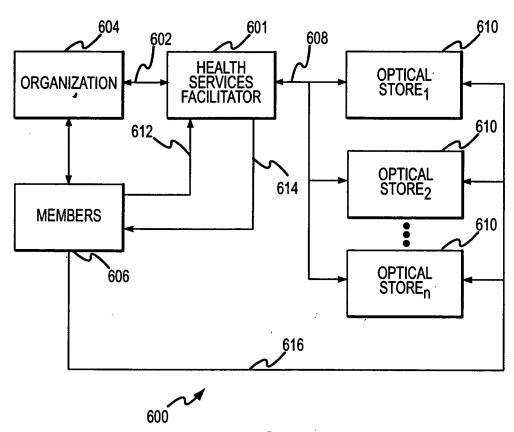


FIG.6

8/50

OCT 1 7 2002

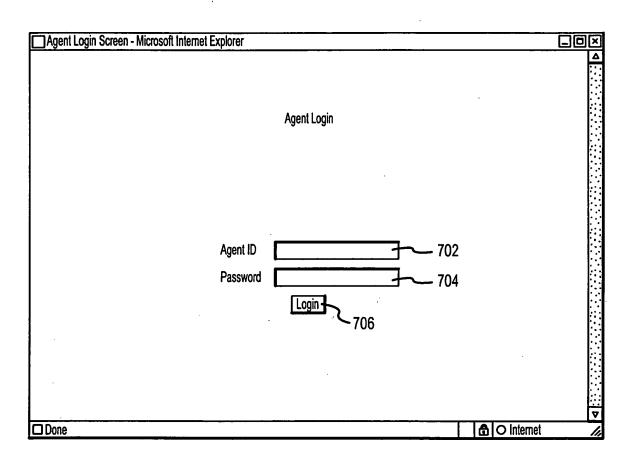


FIG.7

Methods and Apparatus for Facilitating the Provision of Services Lindsay T. Atwood Application No. 09/933 587

Application No. 09/933,587 Attorney Docket No. 10000.02



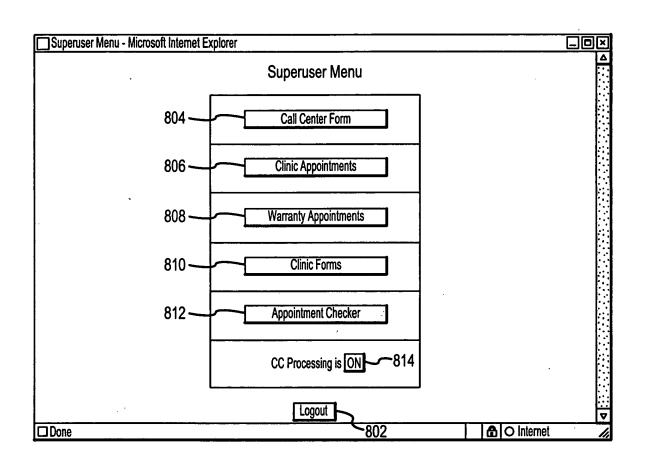


FIG.8

Methods and Apparatus for Facilitating the Provision of Services

Lindsay T. Atwood Application No. 09/933,587 Attorney Docket No. 10000.02



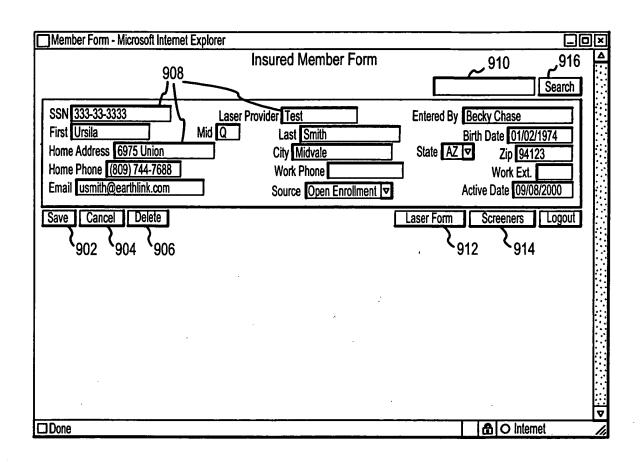


FIG.9



Read the following - Microsoft Internet Explorer				_O×
Read the following: Good morning (afternoon) this is Robert, how may I help How did you hear about our program?	you? Select One - ▼ Select One -			
E H	mployer lealthPlan itality 1002	Leave S	treeners 1	Next>> 1004
·				:: :: :: :: •:
Done Done			♠ O Intern	et /

FIG.10

Methods and Apparatus for Facilitating the Provision of Services Lindsay T. Atwood

Application No. 09/933,587 Attorney Docket No. 10000.02



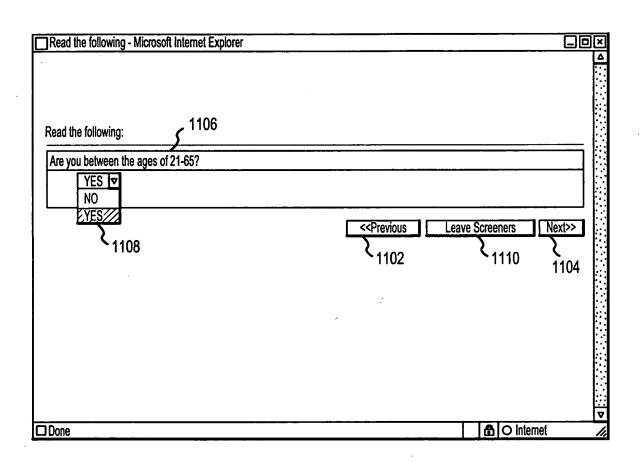


FIG.11



Read the following - Microsoft Internet Explorer		×
		≙
Read the following:		
	<u> </u>	
I'm sorry, but the laser procedures have limitations, and this is one of them. Unfortunately you would not be a candidate through this program.		
We do offer great savings on contact lenses as well. Do you wear contacts?		
NO: Thank you for calling, have a great day.		
YES: If you know your contact lens prescription I could transfer you now to place an order. Or you could just call the same number and choose the contact lens option and a customer service representative will help you with that order.		
We also have a web site you could use to place your order, it is wwwcom		
Previous Start Over Leave Screene	rs	
1202 1 ₁₂₀)4	
1202		
		₽
□ Done □ Conternet □ Conterne		///

FIG.12

OCT 17 2002

Methods and Apparatus for Facilitating the Provision of Services Lindsay T. Atwood Application No. 09/933,587 Attorney Docket No. 10000.02

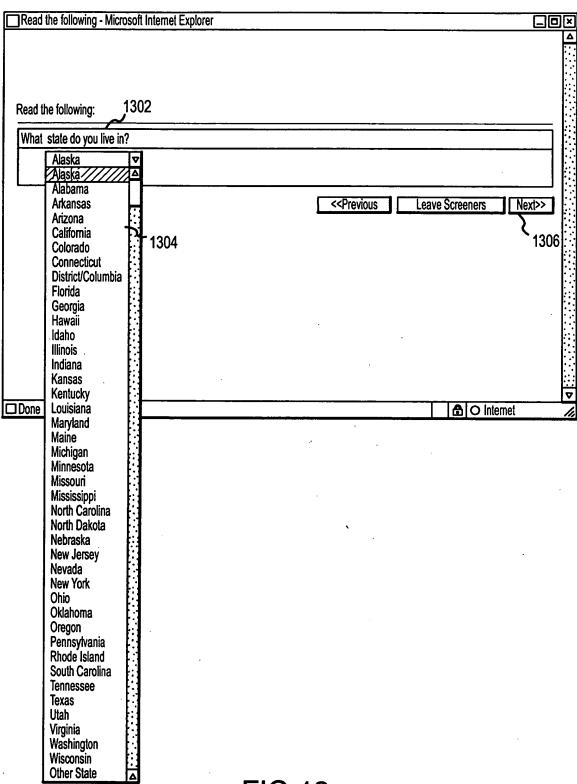
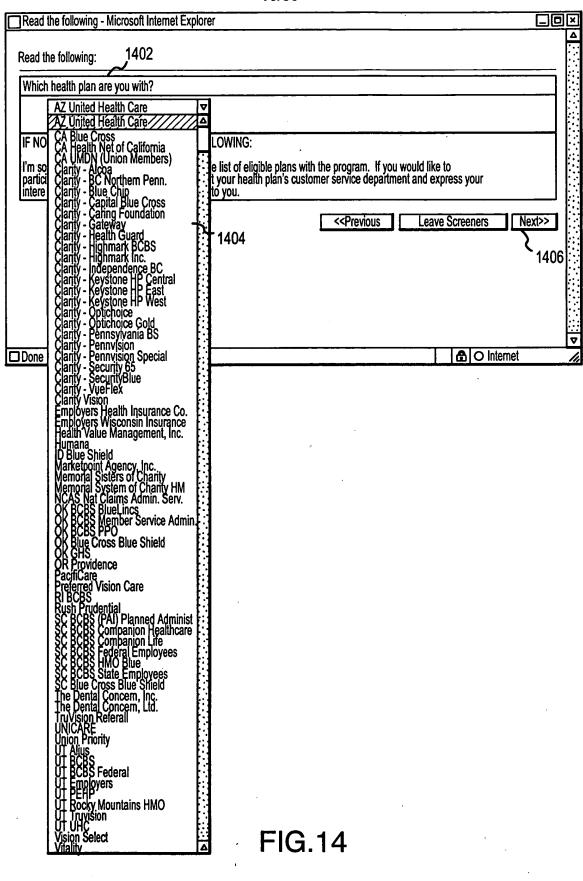


FIG.13

OT 17 2002 EN

Methods and Apparatus for Facilitating the Provision of Services Lindsay T. Atwood Application No. 09/933,587 Attorney Docket No. 10000.02



OT PE VETEN BUT 17 2002 HEREN BUT 17 2002 HEREN

Read the follow	ving - Microsoft Internet Explorer	
	ing: 1502 nited Health Care we offer laser eye services in: (Specified Price Type = HP) ier Vision Institute in Colorado Springs, CO at \$675/\$200 deposit. (HP)	
Las Las	er Vision Institute in Colorado Springs, CO at \$675/\$200 deposit. (HP)	
1504	*If a neighboring state would be more convenient for the patient, click "previous" until you can select another state. If the state is not listed, there is no center available in that state.	Next>> 1506
□ Done	·	

FIG.15

Methods and Apparatus for Facilitating the Provision of Services

OCT 17 2002

Lindsay T. Atwood Application No. 09/933,587 Attorney Docket No. 10000.02

Read the following - Microsoft Internet Explorer		
Read the following:	02	_ <u>△</u>
Now let me tell you a little about the Laser Center.]
CO-LASER VISION INSTITUTE [LVI] - Denver **Because of your health plan, can offer GREAT SAVINGS on Laser Vision correction. Price Per Eye & Deposit Amounts Vitality Members: \$775.00 / \$400.00		
All Other Health Plan Members: \$676.00 / \$200.00		
- The price is per eye, and it includes a comprehensive eye exam, the laser procedure, a (If the caller asks you can tell them follow-up visits are normally set at 1-day, 1 week, 1 m		
-This deposit is required to schedule your pre-operative exam, which reserves your exam you decide not to have the procedure or if you are found not to be a candidate. The reful cancellation. Otherwise, your deposit, is applied to the price of the procedure.		
(The \$450 price per eye is a promotional offer, and only applies to persons with a prescript This will be determined at the initial exam.)	tion of -2.00 or lower with no astigmatism.	
We have excellent surgeons and the doctor in your area is Dr. Paul E. Cutarelli.		
Dr. Paul E. Cutarelli is abreast of all the latest developments in eye surgery and has remain teaching and medical student teaching since 1995. He has done research in various are numerous articles involving Laser treatments. He is the recipient of numerous research a chapters involving the Excimer as well as the Nidek Laser. Dr. Cutarelli has completed or	as of ophthalmology and has published awards and has written various book	
The name of the laser center is the		
-(if the caller asks you can tell them that at this location they use an FDA approved Nidek (if they ask further questions, tell them the Nidek corrects for Nearsightedness and Astigr		
- If you'd like to schedule a comprehensive exam I'll need to ask you some basic medical determine if you are a possible candidate for the procedure.	screening questions which will help	
- Yes, click on "Next"		
- No, Thank you for calling. If you have further questions please visit our website at www.com XXX-XXXX Ext. XXXX.	4004	
Goodbye.	1606 1604]
<\text{Previous}	Leave Screeners Next>>] [
1 Done	♠ ○ Internet	_//

OCT 17 2002 BERT MANERARY

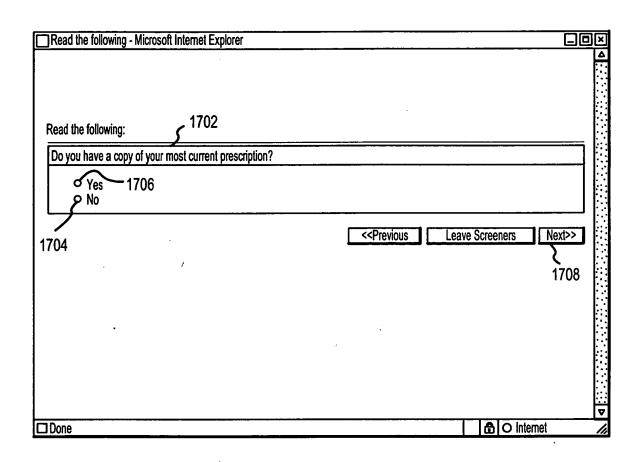


FIG.17

• Methods and Apparatus for Facilitating the Provision of Services Lindsay T. Atwood

Application No. 09/933,587 Attorney Docket No. 10000.02



Read the following - Microsoft Internet Explorer	
Read the following: \$\int 1802	<u>△</u>
Do you know if you are nearsighted or farsighted?	
Nearsighted Farsighted-limited locations check your clinic list	
1804 <- Previous Leave Screeners Ne.	xt>>
Questions to ask to determine whether patient is nearsighted or farsighted if	808
*Do you wear a correction to help you see objects clearly at a distance? YES-patient is nearsighted	
*Do you wear a correction to help you see small print or small objects up close more clearly? YES-patient is farsighted	
*If you removed your eyeglasses or contact lenses, would you be able to see across the room clearly? YES-patient is farsighted	::: \rightarrow
NO-patient is nearsighted □ Done □ □ Internet	V

FIG.18

Methods and Apparatus for Facilitating the Provision of Services Lindsay T. Atwood

Application No. 09/933,587 Attorney Docket No. 10000.02



Read the following - Microsoft Internet Explorer	e×
Read the following: 5 1902	
Do you have an astigmatism? No Yes,Mild Yes,Moderate Severe	
What is astigmatism? Astigmatism is when the corneal surface is irregular. It is football shaped than basketball shaped. Typically if you have any astigmatism you doctor will have explained this to you during an exam.	more 1908
□ Done □	♠ O Internet

FIG.19

Read the following - Microsoft Internet Explorer			
Read the following: 2002			
Has your lens prescription changed significantly in the past year?			
Yes No 2004			
2006	< <pre><<pre>revious</pre></pre>	Leave Screeners	Next>> 2008
			2000
□ Done		I ♠ ○ Inter	met //

FIG.20



Read the following - Microsoft Internet Explorer			_
Read the following:			
Do you wear glasses for reading and close work only?			
Yes, I only wear glasses for reading and close work only No, I wear my glasses for more than reading and close work 2104			
2106	<< Previous	Leave Screeners Next	>)
		21	08
			::: ::: ▼
□Done		♠ ○ Internet	///

FIG.21

OCT 17 2002 BEATER TRANSMENT

Read the following - Microsoft Internet Explorer		
Read the following: 2202		
We discourage you from this procedure because it w called "monovision" where the surgeon will correct The doctor will determine if this procedure is suitab you interested in finding out if this will work for you'	ill affect your distance vision. He 1 eye for distance vision and the le for you at your comprehensi ?	owever, there is a procedure en other eye for near vision. ve exam appointment. Are
No: Thank you for calling TruVision, have a great da		
2204 2206		
	÷	
	< <pre><<pre>revious</pre></pre>	Leave Screeners Next>>
		2208
□Done		□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □

FIG.22

OCT 17 2002

Read the following - Microsoft Internet Explorer		×
Read the following:		
Are you aware of any medical conditions relative keratoconus, RK (radial keratotomy) or ambly	ed to your eyes such as glaucoma, cataracts, opia (lazy eye)?	
2304 2306	< <pre> </pre> Leave Screeners Next>> 2308	
□ Done	↑ O Internet	

FIG.23



Please refer back to your medical doctor for a recommendation. If your doctor says you are a possible candidate then call us back to verify this information and we will gladly schedule a comprehensive exam	Read the following - Microsoft Internet Explorer	×
Refractive procedure does not correct conditions such as these. Because of this condition you are not a candidate for this procedure. If the person has any objections read the following: Please refer back to your medical doctor for a recommendation. If your doctor says you are a possible candidate then call us back to verify this information and we will gladly schedule a comprehensive exam Compared to this condition you are not a candidate for this procedure. Compared to this condition you are not a candidate for this procedure.		<u> </u>
Refractive procedure does not correct conditions such as these. Because of this condition you are not a candidate for this procedure. If the person has any objections read the following: Please refer back to your medical doctor for a recommendation. If your doctor says you are a possible candidate then call us back to verify this information and we will gladly schedule a comprehensive exam Compared to this condition you are not a candidate for this procedure. Compared to this condition you are not a candidate for this procedure.		
Refractive procedure does not correct conditions such as these. Because of this condition you are not a candidate for this procedure. If the person has any objections read the following: Please refer back to your medical doctor for a recommendation. If your doctor says you are a possible candidate then call us back to verify this information and we will gladly schedule a comprehensive exam Compared to this condition you are not a candidate for this procedure. Compared to this condition you are not a candidate for this procedure.	2402	
If the person has any objections read the following: Please refer back to your medical doctor for a recommendation. If your doctor says you are a possible candidate then call us back to verify this information and we will gladly schedule a comprehensive exam **Previous** Leave Screeners** Next>> 2406	Read the following:	
Please refer back to your medical doctor for a recommendation. If your doctor says you are a possible candidate then call us back to verify this information and we will gladly schedule a comprehensive exam	Refractive procedure does not correct conditions such as these. Because of this conditional candidate for this procedure.	tion you are not a
Previous Leave Screeners Next>> 2406	If the person has any objections read the following:	
2406 □	Please refer back to your medical doctor for a recommendation. If your doctor says you candidate then call us back to verify this information and we will gladly schedule a comp	u are a possible prehensive exam
2406 □		
2406 □		
<u>:::</u> ▼	<previous leave="" so<="" td=""><td>creeners Next>></td></previous>	creeners Next>>
<u>:::</u> ▼		2406
		2400 ::
IDono I I A C Internet	□ Done I	↑ O Internet

FIG.24



Read the following - Microsoft Internet Explorer	
Read the following: 2502	·
Do you have diabetes?	
Yes Q No	
2504 2506	<pre><<pre></pre> <pre>/</pre> <pre>Leave Screeners</pre> <pre>Next>></pre></pre>
•	2508
Done	☐ ○ Internet

FIG.25



Read the following - Microsoft Internet Explorer		D X
Read the following: \$ 2602		
Do you take medication to control your diabetes?		
Yes		
2604 2606	< <pre> </pre> Leave Screeners Next>>	
	2608	
□ Done	↑ ○ Internet	₽

FIG.26



28/50

Read the following - Microsoft Internet Explorer	×
Read the following: 2702	Δ :: ::
I'm sorry, this medical condition eliminates you from the program. However, with a me your physician we could direct you into this providers office for consultation. Once you release please call back. We will require a faxed copy of the release and then we will conyour initial exam. Thank you for calling.	edical release from have obtained this ntinue with scheduling
THANK YOU FOR CALLING	
Previous Start Over 2704	Leave Screeners
	50 50 50 50 50 50 50 50 50 50 50 50 50 5
Done	□ O Internet

FIG.27

OT 17 2002

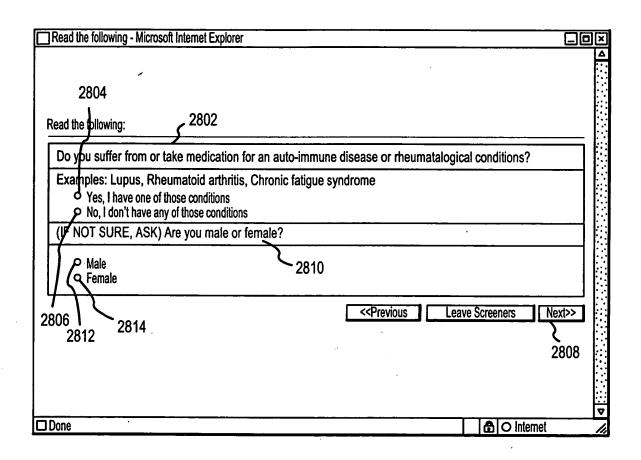


FIG.28



Read the following - Microsoft Internet Explorer	
Read the following: 2902	
It looks like you could be an excellent candidate based on your answers to our screening questions. We had an overwhelming response to this program. We are scheduling on a first come first served basis secure your time slot now, we would need to collect some information and a fully refundable deposit us any major credit card. This will allow us to actually schedule your comprehensive exam. Are you reaschedule now? Yes No	e have To ising dy to
2904 2906 <- Previous Leave Screeners	Next>> 2908
□ Done	111

FIG.29

Read the following - Microsoft Internet Explorer		_0×
Read the following: 3002		
Nead the following.		<u> </u>
Are you pregnant, nursing, or expecting to become	e pregnant?	
Yes, I am (or am planning on being) pregnant No, I am not pregnant 3004 3006		
	< <pre> </pre> Leave Screeners Nex	<u>></u> `∐
	. 30	008
	•	
		▽
□ Done	☐ ○ Internet	li.

FIG.30

Methods and Apparatus for Facilitating the Provision of Services Lindsay T. Atwood Application No. 09/933 587

Application No. 09/933,587 Attorney Docket No. 10000.02



Read the following - Microsoft Internet Explorer	
Read the following: 3102	
Do you wear contact lenses, or have you worn contact lenses during the past 3 month	hs?
Yes Q No	
3104 3106	
	e Screeners Next>>
	3108
□Done	☐ O Internet

FIG.31

OCT 1 7 2082

Methods and Apparatus for Facilitating the Provision of Services
Lindsay T. Atwood
Application No. 09/933,587
Attorney Docket No. 10000.02

Read the following - Microsoft In	lemet Explorer			
ead the following:	3202			
Different types of contacts	must be left out for varying p	eriods of time prior to the	ne comprhensive exam.	
What type of lenses do you	u wear?			
Type of contact	Period of time			
((& Soft	2 weeks			- 1
\ Extended Wear Soft	4 weeks (Patient sleeps in)			İ
Soft Toric	4 weeks			l
Hard Toric	6 weeks			
 Rigid Gas Permeable 	4 weeks			ŀ
 Rigid Gas Permeable 	6 weeks if worn 20+ years			
Rigid Gas Permeable	8 weeks if worn 30+ years		3206	
O True Hard (PMMA)	8 weeks	,		
REMEMBER! Schedule a	ppointment according to this	information.	Ψ.	
	· · · · · · · · · · · · · · · · · · ·			
		<< Previous	Leave Screeners Nex	(t>>
one		<u>,, , , , , , , , , , , , , , , , , , ,</u>	♠ ○ Internet	

FIG.32

OCT 1 7 2002

Read the following - Microsoft Internet Explorer	
Read the following: 3302	
Is that prescription for contacts or for glasses?	
This prescription is for glasses This prescription is for contacts 3304 3306	
	<-Previous Leave Screeners Next>> 3308
□ Done	☐ O Internet

FIG.33



Read the follow	ring - Microsoft Internet Explorer	
Read the followi	ng:3402	
Can you read r	ne your prescription?	
Right Eye	OD Sphere Cylinder x Axis 3404	
Left Eye Bifocal Power	OS x Add (Also may be "NV")	
Range:	Sphere (+5.00 to -12.00 (+) = indicates farsighted person (-) = indicates nearsighted person	
Range:	Cylinder (+4.00 to -4.00)	
Range:	Axis (1-180)	
(DO NOT REAL	O) Click here if contact prescription is in 'contacts' style	
Out of R		ext>> 3408
Done	↑ O Internet	

FIG.34



36/50

Read the follow	ring - Microsoft Internet Explorer	= ×
Read the following	ng:3502	
Can you read n	ne your prescription?	
Right Eye	OD Cylinder Axis	
Left Eye	0s x	
Range:	Sphere (+5.00 to -12.00 (+) = indicates farsighted person (-) = indicates nearsighted person	
Range:	Cylinder (+4.00 to -4.00)	
Range:	Axis (1-180)	
(DO NOT REAL	D) Click here if contact prescription is in 'glasses' style	
Out of R	ange << Previous Leave Screeners	Next>>
•	3506	3508
□ Done	☐ O Interne	

FIG.35

Read the following - Microsoft Internet Explorer	_ O ×
Call Center Laser Form	
ID 1002991 Laser Provider Test Entered By	: Becky Chase
First Ursilla Mid Q Last Smith	Birth Date 01/02/1974
Home Address 6975 Union City Midvale State	e AZ Zip 94123
Home Phone (809) 744-7688 ~3610 Work Phone	Work Ext
Email usmith@earthlink.com Source Open Enrollment	Active Date 09/08/2000
Entered By Becky Chase 3610	Laser Center
Plan Type UT Truvision AK - OurTown - TEST CLINIC \$749/\$200 HP	Best Call Time
Date Paid CC Auth Code 4456 CC Transaction ID 44875654	<u> </u>
Current Comprehensive Tuesday, August 14th, 2001 - 9:45 am Schedule 3	Paid in Full One Eye Only
Transfer To Contact Status	
Surgery Scheduled Date 08/14/2001 Booked Date 12/14/2000	Refund Amt
Surgery Scheduled Time 2:00 PM Cancelled Date	Refund Date
Surgery Performed Date Reason Cancelled R	Refund Auth#
Laser Notes Prefund	Refund XID
Save Cancel Closing Script Appointm	nents Home Logout
□ Done	⚠ O Internet
3606 3608 3616 36	3604 3602

FIG.36

38/50

Read the following - Microsoft Internet Explorer		×
Confirmation Screen		4
Read the following: 3702		
Now to confirm your appointment, it is Saturday, August 11th, 2001 at 8:00 am		
The clinic is located at: 123 S. Main St OurTown, AK		
This pre-operative exam will take about 1- 1 1/2 hours. Your eyes will be dilated so you will need a driver and if you have sunglasses, you may want to bring them as well. Arrive a few minutes early to fill out any paperwork necessary and have your insurance card with you to verify your eligibility for the special prices.		
Any information about the laser or surgical procedures can be answered by the clinic at your pre-operative exam. Thank you for calling and good luck.	:	
Exit and Rese	704	
□ Done □ Done □ Internet		<u> ///</u>

FIG.37



39/50

Comprehensive Scheduler - Microsoft Internet Explorer	<u>_</u>	×
Comprehensive Scheduler		Δ
You have to arrive 30 minutes early We need to discuss separate sx days:) rl	····	
Schedule comprehensive appointment at TEST CLINIC Phone: 888-777-6666 Sun. September 2nd, 2001 Fri. September 14th, 2001		
Current Comprehensive Friday, September 14th, 2001-8:30 am Drop	Done	
3806	3810	
□ Done	☐ ○ Internet	▽
□ Botte □ C 図 ○ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	G	V

FIG.38A



Comprehensive Scheduler - Microsoft Internet Explorer			×
Comprehensive Scheduler			<u> </u>
Appointment changed			
You have to arrive 30 minutes early			
We need to discuss separate sx dáys:) rl			
Schedule comprehensive appointment at TEST CLINIC Phone: 888-777-6666			
Sun. September 2nd, 2001 Fri. September 14th, 2001			
8:00 AM 8:15 AM 8:45 AM 9:00 AM			
9:15 AM 9:30 AM 9:45 AM 10:00 AM			
10:15 AM 10:30 AM			
10:45 AM 11:00 AM 11:15 AM			
11:30 AM 11:35 AM		3808	
Current Comprehensive Friday, September 14th, 2001-8:30 am Drop		<u>)</u>	
		Done	₽
□ Done	♠ ○ Internet		
Start □ C 🖾 ○ 🛘 🔯 Inbox P□Applicati 🕒 (1) 00:00 📵 https://tr 📵 Truvisi 🕒 Docume	~∢⊗ □ 0 Φ⊠	3:20 A	M

FIG.38B



TEST CLINIC Laser Center Appointment Book Click on a particular day to view the day's appointments	
Tuesday, August 14, 2001 Saturday, September 1, 2001 < Back 3904	
□ Done □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	itemet //

FIG.39



Print		Appointment S	Schedule			<u> </u>
	. 1	Tuesday, Augus	st 14, 2001		4000	
	Appointment Time	Patient Name	Patient Phone	Patient Info	4006	
	9:45 AM	Ursilla Smith	(809) 744-7688	View —	1	
4002	9:45 AM				4004	
	9:45 AM					
\	9:45 AM					:::
	10:45 AM					
	10:45 AM					
	10:45 AM					
	10:45 AM	************]	
	11:45 AM			*************		
	11:45 AM			***************************************		
	11:45 AM	 ,				
·	11:45 AM	************	**********			
					<u>-</u>	
	Vious in	rdividual pation	t info for this do	.,		
	view ir	iuiviuuai patien	t info for this da	<u> </u>		▽
☐ Done					O Internet	li.

FIG.40



<u>L</u>		<u>기(×</u>
Home Address 6975 Union City Midvale State AZ Home Phone (809) 744-7688 Work Phone Work Ext	01/02/1974 Zip 94123	4
Plan Type UT Truvision Deposit 200 Price Current Comprehensive Tuesday, August 14th, 2001-9:45 am Booked Date 12/14/2000 LaserNotes	Paid in full 🗆	
Print	Return to Dates 4102	
d □Done	O Internet	♦

FIG.41

OIP E SE

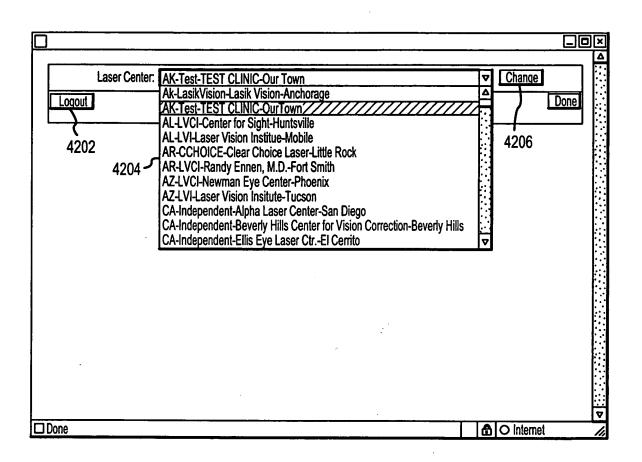


FIG.42



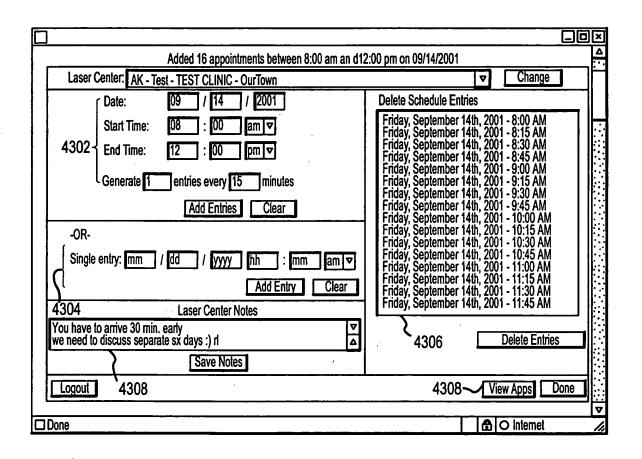


FIG.43



	·		
	Clinic Laser Form		Search
ID 1002991 Laser Provider Test		Entered By: Becky C	Chase
First Ursilla Mid Q	Last Smith	Birth	Date 01/02/1974
Home Address 6975 Union	City Midvale	State AZ	Zip 94123
Home Phone (809) 744-7688	Work Phone	Work Ext	
Email usmith@earthlink.com	Source Open Enrollment	Active	Date 09/08/2000
Plan Type UT Truvision	Deposit	\$200	Price \$749
Current Comprehensive Tuesday, August 14th, 20	001 - 9:45 am	Schedule 4406	Paid in Full Dis
Surgery Scheduled Date 08/14/2001		Booke	ed Date 12/14/2000
Surgery Scheduled Time 2:00 PM		Cancelled D	
Surgery Performed Date		Reason Cancelled	
Laser Notes			▼ △
Save Cancel Print		[GO TO -
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		:	4408
□ Done	, , , , , , , , , , , , , , , , , , , ,	1 16	O Internet

FIG.44

1

Methods and Apparatus for Facilitating the Provision of Services

Lindsay T. Atwood

Application No. 09/933,587

Attorney Docket No. 10000.02 OCT 1 7 2002

·		
ID 1002991 Laser Provider Test	Clinic Laser Form	Entered By: Becky Chase
	Aid Q Last Smith	Birth Date 01/02/1974
Home Address 6975 Union	City Midvale	State AZ Zip 94123
Home Phone (809) 744-7688	Work Phone	Work Ext.
Email usmith@earthlink.com	Source Open Enrollment	Active Date 09/08/2000
Plan Type UT Truvision	Deposit	\$200 Price \$749
Current Comprehensive Tuesday, August	14th, 2001 - 9:45 am	Schedule Paid in Full [
Surgery Scheduled Date 08/14/2001		One Eye Only
Surgery Scheduled Time 2:00 PM		Home Outcomes 450
Surgery Performed Date		Cancell-Comprehensive Exam ReasonCanthing
Laser Notes		-Warranty Exams-
Save Cancel Print		4508 Edit View
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	a de la companya de l	4510 -GO TO -
4502 4504		
Oone		⚠ ○ Internet

FIG.45

Lindsay T. Atwood Application No. 09/933,587 Attorney Docket No. 10000.02



	_o×
OUTCOMES INFORMATION	<u> </u>
4604 - 4602	Search
□Done	☐ O Internet

FIG.46

wietnous and Apparatus for racintating the Provision of Services Lindsay T. Atwood

Application No. 09/933,587 Attorney Docket No. 10000.02



Outcomes Information	
Patient Name: Ursilla Smith Exam History: New Exam Go Go	1002991 Search
	ctive Date: 04/26/2001
Examining Doctor Name: Dr. John Smith ▼ 4704	
OD	OS 🗆 🗄
VAsc 20/ 10 ▼ VAcc 20/ 10 ▼	VAsc 20/ 10 VAcc 20/ 10 V
(MR) 50 X	(MR) X
VD 0 mm	VD 0 mm
K-readings (diopters) / X	K-readings (diopters) X X
Steroid Drops NSAID Drops Anti-Biotic Drop FML	Rewetting Drops Bion Tears
Seems to be working.	Complications 4710
Surgeon Name: Dr. John Smith	
OD	OS
Surg Type: Lasik	Surg Type: Lasik
DATE: 12/15/2000 distance Rx Entered: -3.75/-1.75 X 180	DATE: 12/15/2000 distance Rx Entered: -3.25/-1.00 X 086
Pachymetry	Pachymetry
Laser Used: Autonomous LADAR Vis Micro Karatome: Morta LSKI	
4706	
Home 4702	
□ Done	☆ ○ Internet

FIG.47



50/50

		×
	Appointment Checker	
	-No schedule conflicts were found-	
Logout Home 4802		
4002	•	
	•	
	e e	
		▼
□ Done		♠ ○ Internet

FIG.48